

51009. Confidential Nature of Records.

All individual medical records of beneficiaries acquired by individuals or institutions providing care, the Department, or any other state or local agency, or by any organization contracting to provide administrative services under this program, shall be confidential and shall not be released without the written consent of the beneficiary or his personal representative. This shall not preclude the release of statistical or summary data or information in which individual beneficiaries are not, and cannot be, identified, nor shall it preclude exchange of information between individuals or institutions providing care, fiscal intermediaries, and state or local official agencies. Neither shall this section preclude exchange of information necessary for the purpose of effecting recovery as provided in Welfare and Institutions Code, Sections 10020 through 10025, 14024 and 14124.70 through 14124.79 with persons liable thereunder.

HISTORY:

1. Refiled 6-5-67 as an emergency; effective upon filing. Certificate of Compliance filed 6-9-67 (Register 67, No. 23).
2. Amendment filed 11-15-68; effective thirtieth day thereafter (Register 68, No. 43).
3. Amendment filed 7-13-73; effective thirtieth day thereafter (Register 73, No. 28).
4. Editorial correction (Register 81, No. 38).

51011. Identification of Beneficiary.

All out-of-hospital and inpatient services may be provided subject to the limitations specified in the scope of benefits, and subject to the Medical Assistance classification of the beneficiary upon presentation by a beneficiary of a valid medical care eligibility card issued by a local welfare department, except where these regulations specify that prior authorization for a specific service is required, and evidence of such authorization is presented or furnished, such card shall be deemed adequate authorization to provide services up to the expiration date specified on the card.

HISTORY:

1. Refiled 6-5-67 as an emergency; effective upon filing. Certificate of Compliance filed 6-9-67 (Register 67, No. 23).

51013. Crippled Children Services.

Whenever a beneficiary under age 21 has a medical or surgical condition which would qualify for services under Crippled Children Services, he shall be referred to that program for case management services and prior authorization by the appropriate local or state administrative agency for Crippled Children Services in the county in which the patient lives. Needed medical care not normally provided through Crippled Children Services shall be provided through the procedures established in these regulations.

HISTORY:

1. Refiled 6-5-67 as an emergency; effective upon filing. Certificate of Compliance filed 6-9-67 (Register 67, No. 23).

51014. Vocational Rehabilitation Services.

Whenever a service is recommended on behalf of a Medi-Cal beneficiary on the basis that such service is needed for vocational rehabilitation, he shall be referred to the State Department of Rehabilitation for counseling and evaluation. If the Department concurs in the vocational relevancy of the proposed service, it will provide case management services and make appropriate recommendations on requests for prior authorization to the Medi-Cal consultant.

HISTORY:

1. New section filed 5-31-68; effective thirtieth day thereafter (Register 68, No. 21).

§ 219

DEPARTMENT OF HEALTH SERVICES

Div. 1

Historical Note

Addition of § 219 by Stats.1973, c. 142, p. 388, § 24, allowing the director to investigate the work of licensing boards, failed to become operative under the terms of § 110.5 of that Act upon enactment of Stats.1973, c. 122.

The 1978 amendment inserted, in two places, the words "Department of the" preceding "California Highway Patrol"; substituted "Department" for "Division" preceding "of Forestry"; and added subd. (e).

Library References

Health and Environment ⇐7(1).

C.J.S. Health and Environment §§ 9, 11, 54.

§ 220. Inoperative

Historical Note

Addition of § 220 by Stats.1973, c. 142, p. 388, § 25, requiring approval of director for any changes in rules, regulations

or fees, failed to become operative under the terms of § 110.5 of that Act upon enactment of Stats.1973, c. 122.

§ 221. Licenses, certificates, etc.; issuance and renewal; two-year basis; fees

Notwithstanding any other provision of law, the department by rule or regulation may provide for the issuance and renewal on a two-year basis of licenses, certificates of registration, or other indicia of authority issued pursuant to this code by the department or any agency in the department.

The department may, by rule or regulation, set the fee for such two-year license, certificate of registration, or other indicia, not to exceed twice the annual fee for issuance or renewal set by statute. (Added by Stats.1975, c. 57, p. 104, § 2.)

Library References

Licenses ⇐36.

C.J.S. Licenses § 42.

Article 2

CALIFORNIA CHILDREN'S SERVICES

Sec.

249.

Title of act.

249.

Services for physically defective or handicapped minors; powers and duties of department.

249.2.

Transfer of duties, purposes, responsibilities and jurisdiction.

249.3.

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249.4.

Transfer of officers and employees.

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Intent.

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Handicapped child.

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Pt. 1

CHILDREN'S SERVICES

Sec.

- 250.6. Keeping program abreast of advances in medical science; pilot studies.
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- 251. Services.
- 251.5. California children's services program.
- 252. Designation of agency to administer California children's services program; standards of local administration.
- 252.5. Repealed.
- 252.6, 252.7. Repealed.
- 253. Case finding; consent of parent or guardian.
- 253.5. Diagnosis for handicapped children.
- 254. Application for services.
- 255. Standards of financial eligibility exception for services under the medical therapy program in public schools.
- 255.3. Financial eligibility standards for treatment services; updating.
- 255.5. Continued eligibility; receipt of services under teaching program at medical school facility.
- 256. Determination of eligibility; certification for care.
- 257. Agreements with parents for payment.
- 257.5. Repealed.
- 258. Certification of eligibility; authorization and payment for services; reimbursement.
- 258.5. Repealed.
- 259. Payment for services without certification; furnishing services; gifts and legacies.
- 260. Direct arrangement for services; agreements with parents for payment.
- 261. Payment of services for nonresident children; special grants or allotments for costs.
- 262. Supervision over services; records.
- 263. Consent of parent or guardian; exception.
- 264. Effect of mental retardation.
- 265. County and state appropriations; reimbursement of counties.
- 266. State emergency aid.
- 267. Administration of medical-therapy program; costs; standards.
- 268. California children's services program; sharing costs; standards.
- 269. Program data; purposes.
- 270. Placement of handicapped children for adoption; entitlement to services.
- 271 to 273. Repealed.

*Article 2, Crippled Children Services, was added by
Stats.1968, c. 1316, p. 2485, § 2, operative July 1, 1969.*

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§ 248

DEPARTMENT OF HEALTH SERVICES

Div. 1

The heading of Article 2 was amended by Stats.1978, c. 857, § 2, to read as it now appears.

Former Article 2, Physically Handicapped Children, enacted in 1939, comprising sections 249 to 273, was repealed by Stats.1968, c. 1316, p. 2485, § 1, operative July 1, 1969.

Cross References

Additional educational service program components, see Education Code § 56332.
Compliance with hereditary disorders act, see § 155.
Establishments for handicapped persons, see § 1500 et seq.

Library References

Crippled children services. Report of Senate Social Welfare Subcommittee of General Research, vol. 21, no. 15, p. 154. Vol. 1 of Appendix to Journal of the Senate, Reg.Sess.1969.
Extension of crippled children services. Reports of joint Interim Committee on the Education of Handicapped Children and Adults, 1959, p. 157.

Vol. 1 of Appendix to Journal of the Senate, Reg.Sess.1959.
Rehabilitation of disabled and dependent persons. Report of Senate Interim Committee on the Education and Rehabilitation of Handicapped Children and Adults, 1957, p. 21. Vol. 2 of Appendix to Journal of the Senate, Reg.Sess.1957.

§ 248. Title of act

This article shall be known and may be cited as the Robert W. Crown California Children's Services Act.

(Added by Stats.1973, c. 1085, p. 2201, § 1. Amended by Stats.1978, c. 857, § 3.)

Historical Note

The 1978 amendment substituted "California Children's" for "Crippled Children".

Section 1 of Stats.1978, c. 857, provides: "The Legislature finds that the use of certain descriptive labels which have no medical significance draws negative attention and stigma upon the individual or group concerned, gradually supplants the unique identity and human potential of persons, and injures social values, status, societal mobility, and freedom. Therefore, it is the intent of the Legislature to

change the name of the crippled children's program to the California Children's Services Program and to remove all use of the term crippled from the provisions that provide such program in referring to children with physical handicaps. It is further the intent of the Legislature that such change in name shall not be construed as expanding the list of eligible services available through the program or prohibit the use of existing forms used by the program prior to the use of new forms with the name change."

Administrative Code References

Child health and disability prevention program, see 17 Cal.Adm.Code 6500 et seq.
Immunization against poliomyelitis, diphtheria, pertussis, tetanus, and measles, see 17 Cal.Adm.Code 6000 et seq.
Services for physically handicapped children, see 17 Cal.Adm.Code 2890 et seq.
Tuberculosis screening of employees and volunteers in private, parochial and nursery schools, see 17 Cal.Adm.Code 6600 et seq.

Library References

Social Security and Public Welfare
—197.

C.J.S. Social Security and Public Welfare
—127.

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§ 249. Services for physically defective or handicapped minors;
powers and duties of department

The State Department of Health Services shall establish and administer a program of services for physically defective or handicapped persons under the age of 21 years, in cooperation with the federal government through its appropriate agency or instrumentality, for the purpose of developing, extending and improving such services. The state department shall receive all funds made available to it by the federal government, the state, its political subdivisions or from other sources. The state department shall have power to supervise those services included in the state plan which are not directly administered by the state. The state department shall cooperate with the medical, health, nursing and welfare groups and organizations concerned with the program, and any agency of the state charged with the administration of laws providing for vocational rehabilitation of physically handicapped children.

The reference to "the age of 21 years" in this section is unaffected by Section 1 of Chapter 1748 of the Statutes of 1971 or any other provision of that chapter.

(Added by Stats.1972, c. 27, p. 32, § 2, eff. March 21, 1972, operative July 1, 1973. Amended by Stats.1973, c. 1212, p. 2743, § 26, operative July 1, 1974; Stats.1977, c. 1252, § 131, operative July 1, 1978.)

Historical Note

Operative date of Reorganization Plan No. 1 of 1970, see Historical Note under § 20.

Sections 5, 6, 8 of Stats.1972, c. 27, p. 23, provided:

"Sec. 5. It is the intent of the Legislature that, if Reorganization Plan No. 1 of 1970 becomes operative, Section 249 of the Health and Safety Code, as amended by Section 1 of this act, shall remain in effect only until Reorganization Plan No. 1 of 1970 becomes operative [July 1, 1973] and on that date Section 249 of the Health and Safety Code, as added by Section 2 of this act, which includes the changes in Section 249 made by both Reorganization Plan No. 1 of 1970 and Section 1 of this act, shall become operative.

"Sec. 6. It is the intention of the Legislature that to the extent permitted by federal law, eligibility of persons for services to physically handicapped children pursuant to Article 2 (commencing with Section 249) of Chapter 2 of Part 1 of Division 1 of the Health and Safety Code shall continue to age 21, but that persons 18 years of age and over may consent to

treatment service under Article 2. Notwithstanding any other provision of law, Sections 249, 250.5, and 263 of the Health and Safety Code, as amended by Sections 1, 2, and 3 of this act, respectively, shall not constitute a change in, but are declaratory of, the preexisting law.

"Sec. 8. Sections 1 to 6, inclusive, of this act shall become operative on March 4, 1972."

The 1973 amendment inserted "State" preceding "Department" in the first sentence; deleted from the second sentence the words "and expend" in the phrase "receive and expend all funds"; rewrote the former second sentence as the present second and third sentences; and deleted the last paragraph which had read: "This section shall become operative on the same date as Reorganization Plan No. 1 of 1970 becomes operative" [July 1, 1973].

Sections 439, 448 of Stats.1973, c. 1212, p. 2733, provide:

"Sec. 439. Upon receipt of a formal ruling from the Secretary of Labor, the Secretary of Health, Education, and Welfare, or the head of any federal agency

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Law Review Commentaries

Epilepsias. (1976) 13 San Diego L.Rev.
978.

Library References

Social Security and Public Welfare
©195.

C.J.S. Social Security and Public Wel-
fare § 125.

§ 250.5. Handicapped child

"Handicapped child," as used in this article, means a physically defective or handicapped person under the age of 21 years who is in need of services. The director shall establish those conditions coming within a definition of "handicapped child" except as the Legislature may otherwise include in the definition. Phenylketonuria, hyaline membrane disease, cystic fibrosis, and hemophilia shall be among such conditions.

The reference to "the age of 21 years" in this section is unaffected by Section 1 of Chapter 1748 of the Statutes of 1971 or any other provision of that chapter.¹

(Added by Stats.1968, c. 1316, p. 2485, § 2, operative July 1, 1969. Amended by Stats.1971, c. 1811, p. 3915, § 1; Stats.1972, c. 27, p. 32, § 3, eff. March 21, 1972, operative July 1, 1973.)

¹ Civil Code § 25 note.

Historical Note

The 1971 amendment included "hyaline membrane disease".

The 1972 amendment added the second paragraph.

Operative effect of 1972 amendment, see Historical Note under § 249.

Derivation: Former § 250, enacted by Stats.1929, c. 60, p. 487, § 250, amended

by Stats.1943, c. 210, p. 1109, § 2; Stats. 1961, c. 1829, p. 3917, § 1; Stats.1961, c. 2148, p. 4432, § 2; Stats.1967, c. 1681, p. 4215, § 1.

Pol.C. § 2979b, added by Stats.1927, c. 590, p. 1021, § 1, amended by Stats.1929, c. 752, p. 1430, § 1.

Cross References

Diagnosis for handicapped children, see § 253.5.

Minor, defined, see Civil Code § 25.

Publication of conditions diagnosed, see § 253.5.

Library References

Social Security and Public Welfare
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C.J.S. Social Security and Public Wel-
fare § 125.

Words and Phrases (Perm.Ed.)

Notes of Decisions

1. In general

Former § 250, as amended, changed the age limit of a handicapped child from 18 to 21 years wherein he could be certified for services and a physically handicapped child who had been certificated by a superior court as eligible for services and who

had attained the age of 18 need not have again petitioned the superior court for the issuance of a new certificate provided the age of 18 was attained after the effective date of the statutory amendment. 2 Ops. Atty.Gen. 110.

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§ 250.6 DEPARTMENT OF HEALTH SERVICES Div. 1

§ 250.6. Keeping program abreast of advances in medical science; pilot studies

The department shall keep the program abreast of advances in medical science, leading to the inclusion of other handicapping conditions and services within the limits of and consistent with the most beneficial use of funds appropriated for this purpose. With the approval of the agency administrator the department may carry out pilot studies to determine the need for, or the feasibility of, including other handicapping conditions and services in the program within the limits of available funds appropriated for the program.

(Added by Stats.1968, c. 1316, p. 2485, § 2, operative July 1, 1969.)

Library References

Social Security and Public Welfare C.J.S. Social Security and Public Welfare § 125.
C-195.

§ 250.7. Repealed by Stats.1973, c. 336, p. 756, § 2

Historical Note

The repealed section, added by Stats. 1970, c. 709, p. 1336, § 1, required priority in the use of 1970 appropriated funds for the crippled children's services program.

§ 251. Services

"Services," as used in this article, means any or all of the following:

- (a) Expert diagnosis.
- (b) Medical treatment.
- (c) Surgical treatment.
- (d) Hospital care.
- (e) Physical therapy.
- (f) Occupational therapy.
- (g) Special treatment.
- (h) Materials.

(i) Appliances and their upkeep, maintenance, care and transportation.

* (j) Maintenance, transportation, or care incidental to any other form of "services."

(Added by Stats.1968, c. 1316, p. 2485, § 2, operative July 1, 1969.)

HEALTH AND SAFETY CODE

HEALTH AND SAFETY CODE

§ 321.2

al family planning agency. The Speaker of the board, including a pediatrician, a nurse specializing A member of the State Council on Developmental a Special Education, the Directors of the Department of Social Services and the Superintendent of Public Health, nonvoting members of the state board. The duration of each member maintains the term, whichever is shorter. In order to maintain the Board shall be appointed to the state board for

(3) A reimbursement mechanism that will encourage provider participation in an integrated maternal, child, and adolescent health program.

(4) Current programs that could be combined to foster integrated service delivery.

(5) Systems to assure coordination within the department in order to insure uniform case management and referral of children, youth, and pregnant women.

(6) Coverage of preventive care, health maintenance, and health education and counseling by third party payers.

(h) Review reports and respond to needs and recommendations of the local boards.

(i) Work with local boards to evaluate the success of established programs and assess the potential viability of proposed programs.

(j) Review and make recommendations to the director on written appeals received from local organizations and providers.

(k) Prepare a biennial report to the director summarizing the progress of the state board in fulfilling the above listed duties, powers and responsibilities, which report shall be transmitted to the Legislature and the local boards. The first such report shall be due on or before January 1, 1983.

In order to further the intent of this section and to support the work of the state board, the department shall develop, not later than July 1, 1982, alternative models for the provision of integrated health service delivery to women, children, and adolescents at the local level. Such models shall address the concerns and recommendations of the state board relating to integrated service delivery.

The provisions of this section shall remain in effect only until January 1, 1986, and as of such date is repealed, unless a later enacted statute, which is chaptered before January 1, 1986, deletes or extends such date.

(Added by Stats.1981, c. 1038, p. —, § 5.)

Repeal

Section 320.5 is repealed by its own terms on Jan. 1, 1986.

1981 Legislation

Section 1 of Stats.1981, c. 1038, p. —, provided:

"The Legislature finds and declares that there is a multiplicity of programs and advisory boards influencing policy on maternal, child, and adolescent health services throughout the state. Further, the Legislature finds and declares that while important strides have been made in meeting some specific health needs of mothers and children, no overall plans and standards have as yet been developed for assuring the health of California's children and women of the childbearing age. The resulting fragmented system is characterized by a lack of coordination, continuity, and comprehensive management of maternal, child, and adolescent health services both within local communities and on a statewide basis.

"It is the intent of the Legislature to establish a State Maternal, Child, and Adolescent Health Board, advisory to the Director of the State Department of Health Services in order to develop broad public input and provide consistent statewide policy advice supporting the coordination and integration of state programs serving mothers and children. Further, it is the intent of the Legislature to improve coordination and to promote an innovative and integrated maternal, child, and adolescent health system at the local level, by establishing local maternal, child, and adolescent health boards which may supersede and incorporate other local bodies advisory to local government on programs affecting the health of mothers and children."

Former § 320.5, amended by Stats.1980, c. 1028, p. 3298, § 1, was repealed by Stats.1981, c. 1038, p. —, § 4.

§ 321.2. Establishment of programs; plan requirements; standards for procedures; record system

The governing body of each county * * * or counties shall establish a community child health and disability prevention program for the purpose of providing early and periodic assessments of the health status of children in the county or counties by July 1, 1974. However, this shall be the responsibility of the department for all counties which contract with the state for health services. Contract counties, at the option of the board of supervisors, may provide services pursuant to this article in the same manner as other county programs, provided such option is exercised prior to the beginning of each fiscal year. Each such plan shall include, but is not limited to, the following requirements:

(a) Outreach and educational services.

(b) Agreements with public and private facilities and practitioners to carry out the programs.

Asterisks * * * indicate deletions by amendment

§ 1187

RURAL HEALTH SERVICES

Div. 1

§ 1187. Effectuation, purpose and approval of projects

The state department shall plan and put into operation a number of health services development projects. The purpose of the projects shall be to demonstrate effective ways of providing health care services in underserved rural health areas. The director shall make the final decision on approval of a project.

(Added by Stats.1976, c. 1196, p. 5463, § 1.)

Library References

Health and Environment 6.

C.J.S. Health and Environment § 13.

§ 1187.1. Application for funds; project operators

Applications may be made for funds for health services development projects and such projects may be initiated and operated by any agency, including, but not limited to:

(a) A community agency, including a National Health Services Corps site.

(b) An ongoing rural health program, including migrant health or Indian health program.

(c) A family practice education program.

(d) A county health department.

(e) The State Department of Health Services.

(f) Any health facility or clinic.

(Added by Stats.1976, c. 1196, p. 5463, § 1. Amended by Stats.1977, c. 1252, § 240, operative July 1, 1978.)

Historical Note

The 1977 amendment substituted "State Department of Health" in subd. Department of Health Services" for (e).

Cross References

Clinical practice act, see § 1240 et seq.
 Indians, sufficiency of funding for rural health services, see § 120.02.
 Primary health service hospitals, see § 1239 et seq.

Administrative Code References

Applicants, see 22 Cal. Adm. Code 40213 et seq., 40223 et seq.

Library References

Health and Environment 6.
 States 120, 120 et seq.

C.J.S. Health and Environment § 13.
 C.J.S. States 120, 120 et seq.

United States Code Annotated

Migrant health centers, see 42 U.S.C.A. § 254b.

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RURAL HEALTH SERVICES

§ 1187.5

§ 1187.3. Grants or loans; direct department administration

Projects may be in the form of grants or loans provided under contract between the state department and the contracting nonprofit agency, or may be administered directly by the state department.

(Added by Stats.1976, c. 1196, p. 5463, § 1.)

§ 1187.4. Assistance in preparing grant proposals

The state department may assist community agencies to develop contract proposals.

(Added by Stats.1976, c. 1196, p. 5463, § 1.)

§ 1187.5. Project proposals; project elements

Project proposals shall be considered which address the health needs of rural populations, including, but not limited to, migratory and other agricultural workers, native Americans, and senior citizens, which have insufficient access to adequate levels of health care services due to geographical isolation or economic factors.

Projects which are approved shall contain one or more of the following elements:

(1) Provides primary health care, including preventive health services and diagnostic, treatment, referral, and followup services.

(2) Provides comprehensive health care, including specialized physician services, inpatient and outpatient facilities, laboratory and X-ray services, home health services, and other specialized services.

(3) Provides emergency medical services designed to meet the special problems of rural isolation.

(4) Provides transportation appropriate to achieving the goal of making health care services available to residents of rural areas.

(5) Provides electronic communication technology to improve health care delivery and emergency health services in the designated rural areas.

(6) Establishes regional health systems, including linkage with both rural and urban health programs and facilities.

(7) Improves the quality of medical care and the administrative capabilities of agencies and management systems in rural areas.

(8) Provides health education programs in the designated rural areas, including health and nutrition education, and continuing education for health professionals.

(9) Promotes nurse practitioner and physician assistants programs and other programs for training and placement of health pro-